Washington Post - Nov. 25, 1963

Surgeon Reports on Oswald

DALLAS, Nov. 24. (UPI)—Dr. Malcom O. Perry said today that Lee Harvey Oswald was "lethally injured" by the time he arrived at Parkland Hospital's emergency room.

Oswald, charged with the assassination of President Kennedy, was shot while being transferred to county jail.

Dr. Tom Shires, chief of surgery at Parkland, made the formal statement after Oswald's death.

"We first saw Mr. Oswald in the Parkland Emergency Room No. 2 around 11:30 a.m. (CST). At that time, he was unconscious, had no blood pressure, but made agonal respiratory efforts (dying gasps). The endotracheal tube was placed in his throat to aid breathing by Dr. M. T. Jenkins, chief of anesthesia. Intravenous fluids and blood were started.

Wound Described

"There was a gunshot wound of entrance over the left lower lateral (lower left ribs) chest wall and the bullet could be felt in the subcutaneous tissue (beneath the skin) on the opposite side of the body, over the right lower lateral chest cage. It was probable, from his condition, that the bullet had injured the major blood vessels, aorta (main artery from the heart) and vena cava' below the diaphragm. Consequently, he was taken immediately to the operating room and through a midline abdominal incision, the abdomen was opened.

"Several liters of blood (a liter is 1.057 quarts) were immediately encountered. Exploration revealed that the bullet had gone from the left to right, perforating the spleen, pancreas, aorta, vena cava, right kidney and right lobe of the liver. The bullet then came to rest in the right chest wall.

"The major bleeding points were then identified and controlled. At this time, there was a low but measurable blood pressure.

"Massive transfusions were being given in multiple sites. At this time, cardiac arrest occurred (his heart stopped). The left chest was opened and the heart was found in standstill.

"Cardiac massage was started and a pulse obtained with massage. Cardiac fibrillation (rapid and weak heart flutter) ensued and in spite of intracardiac drugs (injected directly into the heart) and the fibrillation, no effective heart beat was ever established. When the signs of death were absolute, he was pronounced dead at 1:07 p.m.

"The patient never regained consciousness and died of massive injury from a close range gunshot wound."

Shock Could Kill

After the formal statement, Shires said that the type of "shock" suffered by Oswald was "the most effective type" to kill people.

He explained there are about six quarts of blood over all in the body. "Two-thirds of it had emptied into the abdominal cavity, he said.

He said that while on the operating table, Oswald "groaned a time or two," but otherwise made no sounds.

Shires said that some people have been known to recover from the type of wound that killed Oswald.

"It all depends on the pressure, amount of blood lost, and how quick you can arrest the blood flow," he said. "You just don't know about this type of wound."

He said that while Oswald was on the operating table, he received nearly 15 pints of blood (more than a complete replacement of all the blood in Oswald's body).

"I suppose he was conscious for a few minutes after he was shot, but when he got to the emergency room the pupils of his eyes were beginning to dilate in the method of dying persons," the doctor said.

He explained that a dying person goes through this pupil dilation from lack of blood to the brain.

He said that President Kennedy's eyes were already dilated when he was brought into the emergency room. In other words, he died more quickly than his accused assassin.

A wound directly in the brain kills more quickly than a wound in the abdomen, the doctor said.

In respect for our beloved President of The United States

JOHN FITZGERALD KENNEDY

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